

MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street, Room 1130
Sacramento, CA 95814
Telephone: (916) 323-5079

WEBSITE ADDRESS:
<http://caag.state.ca.us/charities/>

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

2000 ANNUAL FINANCIAL REPORT (California Government Code Section 12599)

Failure to file annual financial report by January 30 annually for each calendar year of solicitation may result in fines or filing penalties as defined in Government Code Section 12599.1 (Recently enacted).

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name and Address of Commercial Fundraiser:

CF Number 512
IDC, Ltd.

Name of Commercial Fundraiser
2500 Paseo Verde Parkway

Address of Commercial Fundraiser
Henderson, NV 89074

City, State, and ZIP Code of Commercial Fundraiser
IDA PHONE/MAIL Telecommunications Program 10/15/01

Name and Address of Charitable Organization or Charitable Purposes:

CT No. 87707 FEIN No. 33-0532354
Long Beach Aquarium of the Pacific

Name of Charity
310 Golden Shore, Suite 300

Address of Charity
Long Beach, CA 90802

City, State, and ZIP Code of Charity
2/28/02

(Type of Activity)

(Date or dates must be shown)

1. REVENUE

- A. Cash contributions
B. Entertainment sales or admission charges
C. Sales from products
D. Advertisement sales
E. Membership fees
F. Other sources: (Specify) Matching gifts

a. _____
b. _____
c. _____
d. _____

_____ A.
_____ B.
_____ C.
_____ D.
_____ E.
_____ Fa.
_____ Fb.
_____ Fc.
_____ Fd.

\$516,925

G. TOTAL REVENUE

2. EXPENSES

- A. Fees or commissions
B. Salaries
C. Payroll taxes
D. Employee benefits
E. Cost of merchandise for resale
F. Cost of entertainment
G. Postage
H. Advertising
I. Telephone
J. Rental of equipment
K. Facilities charge
L. Permits
M. Other expenses: (Specify) Data preparation
a. Research/reports
b. Shipping
c. Specialty letters
d. _____

137,668.07
_____ A.
_____ B.
_____ C.
_____ D.
_____ E.
_____ F.
1,404.86
318.88
_____ H.
_____ J.
_____ K.
_____ L.
1,019.30
660.97 Ma.
578.98 Mb.
631.53 Mc.
_____ Md.

\$142,282.59

N. TOTAL EXPENSES

\$374,642.41 N.
3

3. Distribution or net to charitable organization or charitable purposes

4. (a) Is any officer, director, partner or owner of the Commercial Fundraiser in any way affiliated with or control, directly or indirectly, the charitable organization for which the Commercial Fundraiser has contracted to solicit?
[] Yes [X] No If "yes," complete the following:

Name of officer, director, partner or owner of Commercial Fundraiser	Name and address of charitable organization	Relationship of officer, etc. To charitable organization

(b) For each affiliation identified in 4(a), attach copy of the contract between the commercial fundraiser and the charity.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and

Diane M. Carlson

Chairman

Signature of authorized officer (Commercial Fundraiser)

Printed Name

Title

Date

Signature of authorized officer (Charitable organization for verifying the distribution.)

Printed Name

Title

Date

Signature of authorized officer (Charity)

Printed Name

Title

Date

Signature of authorized officer (Charity)

Printed Name

Title

Date

Attorney General's
Registry of Charitable Trusts

JAN 03 2003

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